

## 2008/09 Teacher Application and Information

Return this application to: LeAnn Jenkins

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### \* Must be included and current

Date \_\_\_\_\_

\*Name \_\_\_\_\_ \*Birth date \_\_\_\_\_

\*Address \_\_\_\_\_ \*Zip \_\_\_\_\_

\*Phone # Home \_\_\_\_\_ other \_\_\_\_\_

Emergency contact: \_\_\_\_\_ Phone \_\_\_\_\_

\*E-mail address \_\_\_\_\_

PLEASE LIST AND DISCUSS IN DETAIL: (use the back if necessary)

1. Teaching areas and age levels with which you feel most competent.

\_\_\_\_\_  
\_\_\_\_\_

2. Places and Dates of your past experience with above activities: education, employment, personal experience, etc.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Days (Mon.– Sat.) or Tuesday and/or Thursday evenings when you *will* be available for possible teaching assignments.

\_\_\_\_\_  
\_\_\_\_\_

4. Reference (not a relative or former employer) Name \_\_\_\_\_

Address \_\_\_\_\_

Phones \_\_\_\_\_

\*5. SS# \_\_\_\_\_

*I certify that my answers are true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries of my personal, employment, or educational history and other related matters as may be necessary for an employment decision. I hereby release employers, schools or persons from all liability in responding to inquiries in connection with my application.*

*In the event I am employed, I understand that false or misleading information given in my application or interviews may result in discharge.*

\*Signature \_\_\_\_\_ \*Date \_\_\_\_\_